## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

04/29/2011

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22850

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Certificate of Mailing or Transmission

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the vurner correspondence address as minicated unless corrected before or directed otherwise in Block 1, by (a) specifying a new correspondence of indicating a separate FEADDRESS\* for maintenance fee notifications.

CL	JSTOME	ER I he Stat additran	reby certify that this Fee es Postal Service with su ressed to the Mail Stop smitted to the USPTO (5)	(s) Transmittal is fficient postage for 1SSUE FEE add 71) 273-2885, on t	being de or first el lress abe he date i	posited with the United ass mail in an envelope ove, or being facsimile ndicated below.		
22850							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE	:	FIRST NAMED INVENTOR	ATTO	ATTORNEY DOCKET		NO. CONFIRMATION NO.	
10/586,594	07/20/2006		Naohisa Higashiyama		92504US40PC*	1654		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S)	DUE T	DATE DUE	
nonprovisional	NO	\$1510	\$300	SO SO	\$1810	501	07/29/2011	
nonprovisional	NO	\$1510	3300	- 30	21810		0//29/2011	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
ROSATI, BRAN	DON MICHAEL	3744	165-176000	-				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.8G).  Change of correspondence address for Change of Correspondence Address form PTD/SB/122) attached.  The Address' indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to			olon, Spīvak. Clelland, Maier Neustadt, L.L.P.		
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or typ	pe)				
PLEASE NOTE: Unl recordation as set fort (A) NAME OF ASSIG		tified below, no assignee pletion of this form is NO	data will appear on the pt T a substitute for filing an (B) RESIDENCE: (CITY			he docu	ment has been filed for	
SHOWA DENKO K.K.				Tokyo, JAPAN				

Publication Fee (No small entity discount permitted)

4a. The following fee(s) are submitted:

Advance Order - # of Copies - 3 -

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4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27

b. Applicant is no longer claiming SMALL ENTITY status. Se : 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trad-mark Office.

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🚨 Corporation or other private group entity 📮 Government

A check is enclosed.

Authorized Signature \_ James D. Hamilton Registration No. 28,421 Typed or printed name \_\_\_\_ Registration No.

This collection of information is required by J CFR 1.311. The information is required to obtain or retain a benefit by the public which is to f ie (and by the USPTO to process) an application. Confidentiality is governed by 53 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and the following the confidence of the c

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